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APPLICANTS

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** CONTINUING DATA *****

NONE *DU*

** FOREIGN APPLICATIONS *****

NONE *PZ*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/09/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY WA	SHEETS DRAWING 9	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 5
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EXAMINER'S SIGNATURE _____ INITIALS _____

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 27518
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TITLE
 Asymmetric-area memory cell

FILING FEE RECEIVED 1194	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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